Name and add	ess:	FOR COURT USE ONLY
Telephone Num	per: () RT OF CALIFORNIA • COUNTY OF KINGS	
SUPERIOR COU	RT OF CALIFORNIA · COUNTY OF KINGS	
STREET A	DDRESS:	
CITY, STATE, AND Z	P CODE:	
BRAN	CH NAME:	
PLAINTIFF/F	ETITIONER:	
DEFENDANT/RESPONDENT:		
	PROOF OF SERVICE	Case Number:
I am over the age of 18 years, and not a party to this cause. I am a resident of or employed in the county where the mailing occurred. My residence or business address is as follows (street address, city and state): I served a copy of the following document(s):		
□ By plad po	ervice (check proper box): cing a true copy of each document in the United States stage fully prepaid as follows: Date of deposit:///	s mail in a sealed envelope with
b.	Place of deposit (city and state):	
C.	Envelope was addressed as follows:	
By personally delivering copies to the person served as follows: Person served (name):		
	Date:/ Time:	-
	Address:	
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct:		
Date:	_//	
(Type or p	orint name) (Signature of so	erver)